

**NEVADA DISCLOSURE OF
REPRESENTATION OR COUNSELING OF A PRIVATE PERSON
BEFORE A STATE AGENCY OF THE EXECUTIVE BRANCH**

PERSONAL INFORMATION:

NAME:	TITLE OF PUBLIC OFFICE:
ADDRESS:	
CITY, STATE, ZIP:	
TELEPHONE	E-MAIL:

I HEREBY DISCLOSE that during calendar year _____ that I represented or counseled a private person for compensation before a state agency of the executive branch and hereby make a disclosure of such representation, pursuant to NRS 281A.410.3.

NAME OF CLIENT:	
NATURE OF REPRESENTATION:	
NAME OF STATE AGENCY:	

NAME OF CLIENT:	
NATURE OF REPRESENTATION:	
NAME OF STATE AGENCY:	

If additional pages are needed, please use additional pages form, attach and indicate the number of attached pages: _____

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Date: _____

Signature: _____

FILE COMPLETED FORM WITH:

Nevada Commission on Ethics
3476 Executive Pointe Way, Suite 10
Carson City, Nevada 89706
775.687.5469 • 775.687.1279 fax

Print Name:

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